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## **ANNEX A**

## Notice Concerning Fiduciary Relationship

► Go to [www.irs.gov/Form56](http://www.irs.gov/Form56) for instructions and the latest information.  
(Internal Revenue Code sections 6036 and 6903)

OMB No. 1545-0013

### Part I Identification

Name of person for whom you are acting (as shown on the tax return)	Identifying number	Decedent's social security no.
<u>James Edward MacAlpine</u>		<u>238-86-5716</u>
Address of person for whom you are acting (number, street, and room or suite no.)		
<u>603 Woodlea Court</u>		
City or town, state, and ZIP code (If a foreign address, see instructions.)		
<u>Asheville, North Carolina 28806</u>		
Fiduciary's name		
<u>R. Andrew Murray</u>		
Address of fiduciary (number, street, and room or suite no.)		
<u>Office of the U.S. Attorney — WDNC 233 U.S. Courthouse Bldg. 100 Otis St.</u>		
City or town, state, and ZIP code	Telephone number (optional)	
<u>Asheville, NC 28801</u>	<u>( 828 ) 271-4661</u>	

### Section A. Authority

- 1 Authority for fiduciary relationship. Check applicable box:
- a ☐ Court appointment of testate estate (valid will exists)
- b ☐ Court appointment of intestate estate (no valid will exists)
- c ☐ Court appointment as guardian or conservator
- d ☒ Valid trust instrument and amendments
- e ☐ Bankruptcy or assignment for the benefit or creditors
- f ☐ Other. Describe ► \_\_\_\_\_
- 2a If box 1a or 1b is checked, enter the date of death ► \_\_\_\_\_
- b If box 1c—1f is checked, enter the date of appointment, taking office, or assignment or transfer of assets ► \_\_\_\_\_

### Section B. Nature of Liability and Tax Notices

- 3 Type of taxes (check all that apply): ☐ Income ☐ Gift ☐ Estate ☐ Generation-skipping transfer ☐ Employment  
☐ Excise ☐ Other (describe) ► \_\_\_\_\_
- 4 Federal tax form number (check all that apply): a ☐ 706 series b ☐ 709 c ☐ 940 d ☐ 941, 943, 944  
e ☐ 1040, 1040-A, or 1040-EZ f ☐ 1041 g ☐ 1120 h ☐ Other (list) ► \_\_\_\_\_
- 5 If your authority as a fiduciary does not cover all years or tax periods, check here . . . . . ► ☐  
and list the specific years or periods ► \_\_\_\_\_

For Paperwork Reduction Act and Privacy Act Notice, see separate instructions.

Cat. No. 16375I

Form **56** (Rev. 11-2017)

**Part II Revocation or Termination of Notice****Section A—Total Revocation or Termination**

- 6** Check this box if you are revoking or terminating all prior notices concerning fiduciary relationships on file with the Internal Revenue Service for the same tax matters and years or periods covered by this notice concerning fiduciary relationship ► ☐

Reason for termination of fiduciary relationship. Check applicable box:

- a** ☐ Court order revoking fiduciary authority  
**b** ☐ Certificate of dissolution or termination of a business entity  
**c** ☐ Other. Describe ► \_\_\_\_\_

**Section B—Partial Revocation**

- 7a** Check this box if you are revoking earlier notices concerning fiduciary relationships on file with the Internal Revenue Service for the same tax matters and years or periods covered by this notice concerning fiduciary relationship . . . . . ► ☐  
**b** Specify to whom granted, date, and address, including ZIP code.  
 ► \_\_\_\_\_

**Section C—Substitute Fiduciary**

- 8** Check this box if a new fiduciary or fiduciaries have been or will be substituted for the revoking or terminating fiduciary and specify the name(s) and address(es), including ZIP code(s), of the new fiduciary(ies) . . . . . ► ☐  
 ► \_\_\_\_\_

**Part III Court and Administrative Proceedings**

Name of court (if other than a court proceeding, identify the type of proceeding and name of agency)		Date proceeding initiated	
UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF NORTH CAROLINA, AS		08/08/2018	
Address of court		Docket number of proceeding	
U.S. Courthouse Bldg. 100 Otis St.		1:18-cr-00092	
City or town, state, and ZIP code	Date	Time	Place of other proceedings
Asheville, NC 28801		<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	

**Part IV Signature**

<b>Please Sign Here</b>	I certify that I have the authority to execute this notice concerning fiduciary relationship on behalf of the taxpayer.		
	► _____ Fiduciary's signature	_____ Title, if applicable	_____ Date

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